Attachment D

State Of Minnesota - Affirmative Action Certification

If your response to this solicitation is or could be in excess of \$100,000, complete the information requested below to determine whether you are subject to the Minnesota Human Rights Act (Minnesota Statutes 363A.36) certification requirement, and to provide documentation of compliance if necessary. It is your sole responsibility to provide this information and—if required—to apply for Human Rights certification prior to the due date of the bid or proposal and to obtain Human Rights certification prior to the execution of the contract. The State of Minnesota is under no obligation to delay proceeding with a contract until a company receives Human Rights certification.

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BOX A – For companies which have employed more than 40 full-time employees within Minnesota on any single working day during the previous 12 months. All other companies proceed to BOX B.					
Your response will be rejected unless your business: has a current Certificate of Compliance issued by the Minnesota Department of Human Rights (MDHR) -or-					
has submitted an affirmative action plan to the ME the responses are due.		-	_		
Check one of the following statements if you have employed single working day during the previous 12 months: ☐ We have a current Certificate of Compliance issued by to certificate with your response. ☐ We do not have a current Certificate of Compliance. How MDHR for approval, which the Department received on the We do not have a Certificate of Compliance, nor has the company. We acknowledge that our response will be Department of Human Rights for assistance. (See be	he MDHR. owever, we MDHR rec rejected.	Proceed to BOX C. submitted an Affirma (date). Proceed an Affirmative Proceed to BOX C.	Include a contive Action Forceed to Both Action Plan	opy of your Plan to the OX C. from our	
Please note: Certificates of Compliance must be issued by Action Plans approved by the Federal government, a county approved by the Minnesota Department of Human Rights be	, or a munic	cipality must still be re			
BOX B – For those companies not described in BOX A Check below. ☐ We have not employed more than 40 full-time employed 12 months. Proceed to BOX C.	es on any si	ngle working day in N	⁄Iinnesota wi	thin the previous	
BOX C – For all companies					
By signing this statement, you certify that the information probehalf of the responder. You also certify that you are in contapply to your company. (These requirements are generally to federal projects or contracts. Contractors are alerted to these	npliance wi	th federal affirmative by by participating as	action requir a prime or su	ements that may	
Name of Company:	I	Date			
Authorized Signature:		Telephone number:			
Printed Name:		Title:			
For assistance with this form, contact: Minnesota Department of Human Rights, Compliance & Commu					
Mail: The Freeman Building 625 Robert Street North, Saint Paul, MN 55155	TC Metro	: (651) 296-5663	Toll Free:	800-657-3704	
Web: www.humanrights.state.mn.us Email: compliance.mdhr@state.mn.us	Fax:	(651) 296-9042	TTY:	(651) 296-1283	